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PUBLIC DISCLOSURE COMMISSION 711 CAPITOL WAY RM 206 PO BOX 40908 0LYMPIA WA 98504-0908 (360) 753-1111 TOLL FREE 1-877-601-2929	LOBBYIST	REGISTRATION	L 1	ATE FILED POE SE
1. Lobbyist Name	<u></u>			,
Lori Evans				
Permanent Business Address 3334 Gull Harbor Rd NE			Business Telephone Numbers	
3334 Guil Harbor Ru NE			Permanent ()
		•	Temporary ()
City	State	Zip	Cell Phone (360+791-1595
Olympia WA 98506			or Pager	1000
Temporary Thurston County address during legislative session				ee
			E-Mail Address	
Employer's name and address (person or group for which you lobby)			Lori@LoriEvans.US	
Teck American & Teck Washington, 501 N Riverpoint Blvd Suite 300, PO Box 3087, Spokane WA 99220-3087			Employer's occupation, business or description of purpose of organization	
			N Airmira ar	
Name and address of person having custody of accounts, receipts, books or other documents which substantiate			Mining E-Mail Address	
lobbyist reports. (Person responsible for producing the lobbyist employer's annual L-3 report.)			Kris.McCaig@teck.com	
Kris McCaig, same as above, (509) 623-4501		•		- u.g@.com.com
5. What is your pay (compensation) for lobbying?		Description of employment (check one	or more boyes)	
\$ 2250 per month		☐ Full time employee	or more boxes,	☐ Sole duty is lobbying
(hour, day, month, year) Other: Explain:		☐ Part time or temporary employee ☑ Lobbying is only a part		
	✓ Contractor, retainer or similar agreement of other duties ☐ Unsalaried officer or member of group			
6. Are you reimbursed for lobbying expenses? Explain which	Does employer pay any of your lobbying expenses directly?			
Yes: \$ per Yes: I am reimbursed for expenses.	If yes, explain which ones.			
No: I am not reimbursed for expenses.				,
7. How long do you expect to lobby for this organization?				
	ng legislative session	Other, Explain:		
Is your employer a business or trade association or organ associations, or organizations? If "yes," attach a list showing the past two years or is expected to pay over \$1,450 this year.	nization which tobbies on be the name and address of e	chalf of its members or a representative e ach member or funder who has paid fees	ntity which lobb , dues or other p	es on behalf of businesses, groups, payments over \$1,450 during either of
	•	d, pays, or is expected to pay over \$1,450		_
LI Yes. The list is of parties attached				
Does your employer have a connected, related or closely to fund raising events? If so, list the name of that political acti	affiliated political action cor	mmittee which will provide funds for you to	o make political	contributions including purchase tickets
☑ No				• • •
Yes. Name of the committee is:				
10. If lobbyist is a company, partnership or similar business entity which employs others to perform actual lobbying duties, list name of each person who will lobby. (See WAC 390-20-143 and 144 for instructions.)				
			*	
11. Areas of interest. Lobbying is most frequent before legislary state agencies concerned with following a philadelegislary	ative committee members	Remarks:		
or state agencies concerned with following subjects: CODE SUBJECT CODE	SUBJECT			
01 Agriculture 09	Health Care			
02 0	Higher education	1		~

04 | 05 | **Z** | 06 | **Z** | Education Labor Energy and utilities
Environmental affairs - natural Law and justice Local government resources - parks State government 07 🗖 Financial institutions and Technology Insurance 08 Fiscal Transportation Other - Specify: CERTIFICATION: I hereby certify that the above is a true, complete and correct **EMPLOYER'S AUTHORIZATION**: Confirming the employment authority to lobby described in this registration statement. statement. LOBBYIST'S SIGNATURE DATE EMPLOYER'S SIGNATURE, NAME TYPED OR PRINTED, AND TITLE DATE Kris R. McCaig, Manager, Environment & Public Affairs 12/05/18 NOT VALID UNLESS SIGNED BY BOTH